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PTO/SB/50 (4/98)
Approved for use through 09/30/2000. OMB 0651-0033
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE
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REISSUE PATENT APPLICATION TRANSMITTAL

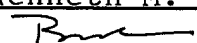
| | | |
|--------------------------------------------------------------------------------------------------------------|------------------------------------------------|-------------------|
| Address to: Assistant Commissioner for Patents Box Patent Application Washington, DC 20231 | Attorney Docket No. | 41766 |
| | First Named Inventor | Alfred C. Nichols |
| | Original Patent Number | 5,783,700 |
| | Original Patent Issue Date (Month/Day/Year) | 7/21/1998 |
| | Express Mail Label No. | EK666547062US |

APPLICATION FOR REISSUE OF: ☒ Utility Patent ☐ Design Patent ☐ Plant Patent
(check applicable box)

| APPLICATION ELEMENTS | ACCOMPANYING APPLICATION PARTS |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 1. <input checked="" type="checkbox"/> * Fee Transmittal Form (PTO/SB/56) (Submit an original, and a duplicate for fee processing) | 7. <input type="checkbox"/> Foreign Priority Claim (35 U.S.C. 119) (if applicable) |
| 2. <input checked="" type="checkbox"/> Specification and Claims (amended, if appropriate) | 8. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations |
| 3. <input type="checkbox"/> Drawing(s) (proposed amendments, if appropriate) | 9. <input type="checkbox"/> English Translation of Reissue Oath/Declaration (if applicable) |
| 4. <input type="checkbox"/> Reissue Oath / Declaration (original or copy) (37 C.F.R. § 1.175)(PTO/SB/51 or 52) | 10. <input type="checkbox"/> Statement(s) <input checked="" type="checkbox"/> * Small Entity Statement filed in prior application. (PTO/SB/09-12) Status still proper and desired |
| 5. Original U.S. Patent <input type="checkbox"/> Offer to Surrender Original Patent (37 C.F.R. § 1.178) (PTO/SB/53 or PTO/SB/54) or <input type="checkbox"/> Ribboned Original Patent Grant <input type="checkbox"/> Affidavit / Declaration of Loss (PTO/SB/55) | 11. <input checked="" type="checkbox"/> Preliminary Amendment |
| 6. Original U.S. Patent currently assigned? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If Yes, check applicable box(es)) <input type="checkbox"/> Written Consent of all Assignees (PTO/SB/53 or 54) <input type="checkbox"/> 37 C.F.R. § 3.73(b) Statement <input type="checkbox"/> Power of Attorney | 12. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) (Should be specifically itemized) |
| | 13. <input type="checkbox"/> Other: _____ |

*** NOTE FOR ITEMS 1 & 10: IN ORDER TO BE ENTITLED TO PAY SMALL ENTITY FEES, A SMALL ENTITY STATEMENT IS REQUIRED (37 C.F.R. § 1.27), EXCEPT IF ONE FILED IN A PRIOR APPLICATION IS RELIED UPON (37 C.F.R. § 1.28).**

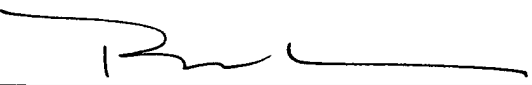
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|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------|-----------|--------------|----------|--------------|
| 14. CORRESPONDENCE ADDRESS | | | | | |
| <input type="checkbox"/> Customer Number or Bar Code Label <input checked="" type="checkbox"/> Correspondence address below (Insert Customer No. or Attach bar code label here) | | | | | |
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| Country | United States | Telephone | 205-930-5383 | Fax | 205-930-5101 |

| | | | |
|-------------------|-------------------------------------------------------------------------------------|-----------------------------------|---------|
| NAME (Print/Type) | Kenneth M. Bush | Registration No. (Attorney/Agent) | 40,544 |
| Signature |  | Date | 7-20-00 |

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108/208 1.16(h) P.N. 5,783,700 1660.00

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| REISSUE APPLICATION FEE TRANSMITTAL FORM | | | | | | Docket Number (Optional) 41766 | | |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------|-----------------------------|---------------|-----------------------------------|---------------------------|-----|
| Claims as Filed - Part 1 | | | | | | | | |
| Claims in Patent | For | Number Filed in Reissue Application | (3) Number Extra | Small Entity | | Other than a Small Entity | | |
| | | | | Rate | Fee | Rate | Fee | |
| (A) 15 | Total Claims (37 CFR 1.16(j)) | (B) 15 | **** 0 | = x \$ 9. = | | or | x \$ = | |
| (C) 2 | Independent Claims (37 CFR 1.16(i)) | (D) 2 | * 0 | = x \$ 39 = | | | x \$ = | |
| Basic Fee (37 CFR 1.16(h)) | | | | | \$ 345 | | \$ | |
| Total Filing Fee | | | | | \$ 345 | OR | \$ | |
| Claims as Amended - Part 2 | | | | | | | | |
| | (1) Claims Remaining After Amendment | | (2) Highest Number Previously Paid For | (3) Extra Claims Present | Small Entity | | Other than a Small Entity | |
| | | | | | Rate | Fee | Rate | Fee |
| Total Claims (37 CFR 1.16(j)) | *** 42 | MINUS | ** 20 | * = 22 | x \$ 9. = 198 | or | x \$ = | |
| Independent Claims (37 CFR 1.16(i)) | *** 6 | MINUS | ***** 3 | = 3 | x \$ 39 = 117 | | x \$ = | |
| Total Additional Fee | | | | | \$ 315 | OR | \$ | |
| <p>* If the entry in (D) is less than the entry in (C), Write "0" in column 3.</p> <p>** If the "Highest Number of Total Claims Previously Paid For" is less than 20, Write "20" in this space.</p> <p>*** After any cancellation of claims</p> <p>**** If "A" is greater than 20, use (B - A); if "A" is 20 or less, use (B - 20).</p> <p>***** "Highest Number of Independent Claims Previously Paid For" or Number of Independent Claims in Patent (C).</p> | | | | | | | | |
| <p><input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____ A duplicate copy of this sheet is enclosed.</p> <p><input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any additional fees under 37 CFR 1.16 or 1.17 which may be required, or credit any overpayment to Deposit Account No. <u>501346</u>. A duplicate copy of this sheet is enclosed.</p> <p><input checked="" type="checkbox"/> A check in the amount of \$ <u>660.00</u> to cover the filing / additional fee is enclosed.</p> | | | | | | | | |
| <u>7-20-00</u> Date | |  Signature of Applicant, Attorney or Agent of Record Kenneth M. Bush Typed or printed name | | | | | | |


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 PATENT AND TRADEMARK OFFICE
 APPEALS

I, Kenneth M. Bush, do hereby certify that a copy of the enclosed "REISSUE APPLICATION"
for Patent No. 5,783,700, was served on the following counsel of record by Express Mail Label number
EK666547076US on this the 20th day of July, 2000, addressed to:

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Birmingham, AL 35255-5727
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Facsimile: (205) 930-5101



I, Kenneth M. Bush, do hereby certify that the enclosed "REISSUE APPLICATION" for Patent No. 5,783,700, was filed by Express Mail number EK666547062US on this the 20th day of July, 2000, addressed to:

Judge Fred E. McKelvey
Board of Patent Appeals and Interferences
Crystal Gateway 2, 10th Floor
1225 Jefferson-Davis Highway
Arlington, VA 22202



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